

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Chief</i>		<i>11-26-01</i>
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>R.B</i>	<i>1076</i>	<i>12/15/01</i>
RESPONSE FORMALITY REVIEW	<i>AG</i>	<i>640</i>	<i>5-3-02</i>

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ..... Canceled      A ..... Appeal  
 : ..... Restricted      O ..... Objected

Claim	Date	Claim	Date	Claim	Date
Final		Final		Final	
Original		Original		Original	
1		51		131	
2		52		132	
3		53		133	
4		54		134	
5		55		135	
6		56		136	
7		57		137	
8		58		138	
9		59		139	
10		60		140	
11		61		141	
12		62		142	
13		63		143	
14		64		144	
15		65		145	
16		66		146	
17		67		147	
18		68		148	
19		69		149	
20		70		150	
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22		72		152	
23		73		153	
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25		75		155	
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27		77		157	
28		78		158	
29		79		159	
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31		81		161	
32		82		162	
33		83		163	
34		84		164	
35		85		165	
36		86		166	
37		87		167	
38		88		168	
39		89		169	
40		90		170	
41		91		171	
42		92		172	
43		93		173	
44		94		174	
45		95		175	
46		96		176	
47		97		177	
48		98		178	
49		99		179	
50		100		180	

BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here